

# **Application Data Sheet**

## **Application Information**

Application number::	Unassigned
Filing Date::	October 27, 2003
Application Type::	Utility
Subject Matter::	
Suggested classification::	class 568, 568, 564, 562 subclass various sulfide subclasses
Suggested Group Art Unit::	1621
CD-ROM or CD-R?::	
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	No
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	POLYSUBSTITUTED INDAN-1-OL SYSTEMS FOR THE PROPHYLAXIS OR TREATMENT OF OBESITY
Attorney Docket Number::	38005-0188
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	0
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contractor Grant Numbers::	

Secrecy Order in Parent Appl.?: No

## Applicant Information

Applicant Authority Type: Inventor  
Primary Citizenship Country: Germany  
Status:  
Given Name: Gerhard  
Middle Name:  
Family Name: Jaehne  
Name Suffix:  
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State or Province of Residence:  
Country of Residence: Germany  
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City of mailing address: Frankfurt  
State or Province of mailing address:  
Country of mailing address: Germany  
Postal or Zip Code of mailing address: 65929

## Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	
Given Name::	Volker
Middle Name::	
Family Name::	Krone
Name Suffix::	
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State or Province of Residence::	
Country of Residence::	Germany
Street of mailing address::	Zu den Eichen 25
City of mailing address::	Hofheim
State or Province of mailing address::	
Country of mailing address::	Germany
Postal or Zip Code of mailing address::	65719

## Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	
Given Name::	Martin
Middle Name::	
Family Name::	Bickel
Name Suffix::	
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State or Province of Residence::	
Country of Residence::	Germany
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City of mailing address::	Bad Homburg
State or Province of mailing address::	
Country of mailing address::	Germany
Postal or Zip Code of mailing address::	61348

## Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	
Given Name::	Matthias
Middle Name::	
Family Name::	Gossel
Name Suffix::	
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State or Province of Residence::	
Country of Residence::	Germany
Street of mailing address::	Im Lorsbachtal 17a
City of mailing address::	Hofheim
State or Province of mailing address::	
Country of mailing address::	Germany
Postal or Zip Code of mailing address::	65719

## Correspondence Information

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City of mailing address:: Washington  
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Fax Number: 202-912-2020  
  
E-Mail address:: pgranados@hewm.com

**Representative Information**

Representative Customer Number::	26633	
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- OR -

Representative Designation::	Registration Number::	Representative Name::

## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Germany	101 42 659.3	August 31, 2001	Yes



## Assignee Information

Assignee name::	Aventis Pharma Deutschland GmbH
Street of mailing address::	65929 Frankfurt am Main
City of mailing address::	Frankfurt
State or Province of mailing address::	
Country of mailing address::	GERMANY
Postal or Zip Code of mailing address::	